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	appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE Al maintenance fee notifications.							correspondence address as arate "FEE ADDRESS" for		
•	CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block 1 for 590 12/02/2005	any change of address)	PE	<u></u>	Note: A certificate of Fee(s) Transmittal. The papers. Each addition have its own certificate	al paper, such :	as an assignme	or domestic mailings of the for any other accompanying ent or formal drawing, must	
L	Matthew S. Bethards Stoel Rives LLP 201 South Main Street Suite 1100		FEB 2 4 2006		15 30 W	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
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2	FC:1504	700.00 OP							(Date)	
	APPLICATION NO.	FILING DX 1 00 UP	F	IRST NAME) INVEN	ITOR	ATTORNEY I	OOCKET NO.	CONFIRMATION NO.	
	10/764,903	01/26/2004		Troy l	Miller	3010.2.2CIP			2320	
	TITLE OF INVENTION: A	SSIST DEVICE FOR GETT	ING INTO AND C	UT OF SIT	ring o	R PRONE POSITIONS	ON BEDS A	ND SIMILAR	FURNITURE	
F	C:8001	15.00 OP								
	APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PU	JBLICATION FEE	TOTAL FE	E(S) DUE	DATE DUE	
nonprovisional		YES	\$700		\$300		\$1000		03/02/2006	
	EXAM	IINER	ART UNIT		CI	LASS-SUBCLASS]			
į	CONLEY, F	CONLEY, FREDRICK C		3673		005-662000	•			
	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47: Rev 03-02 or more recent)			•	. For printing on the patent front page, list) the names of up to 3 registered paten			Matthe	w S. Bethards	
				or agents OR, alternatively,			.Stoe1		Rives LLP	
				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
							locument has been filed for			
	(A) NAME OF ASSIGN	EE	(B)	RESIDENC	E: (CIT	Y and STATE OR CO	UNTRY)			
Standers, Inc. Logan, Utah										
	Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the p	atent) :	☐ Individual 🖾 C	orporation or o	ther private gr	oup entity Government	
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	Advance Order - # of	Copies		Deposit Acc	ount Nu	mber 50237	farge the requi	lose an extra c	copy of this form).	
·		(from status indicated above MALL ENTITY status. See		b. Applic	ant is no	o longer claiming SMA	LL ENTITY st	atus. See 37 C	FR 1.27(g)(2).	
La. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. La. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.										
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Typed or printed name Matthew S. Bethards Registration No. 5					No. 51,	466				
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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity)						111	Docket No.	
O P(F C.F.R. 1.311)						62716/4		
Applicant(s): Troy Miller FEB 2 4 2006								
Αp	plication No.	Filing Date	Examiner		Customer No.	Group Art Unit	Confirmation No.	
		Fredrick C. Con	ley	32642	3673	2320		
Inve		ST DEVICE FOR GET	TING INTO AND C	OUT OF	SITTING OR PE	ONE POSITION	S ON BEDS AND	
•	SIMII	LAR FURNITURE						
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×	Utility Fee:	\$ 700.00	Design Fee:			Plant Fee:		
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		arge the amount of						
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	Meett Better Dated: February 24, 2006							
	latthew S. Beth							
	legistration No. TOEL RIVES I							
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CERTIFICATE OF	Docket No.						
Applicant(s): Troy Mi	62716/4						
Application No. 10/764,903	Filing Date January 26, 2004	2 4 2006 Fredrick C. Conley	Group Art Unit 3673				
ASSIST DEVICE FOR GETTING IN OUT OF SITTING OR PRONE POSITIONS ON BEDS AND SIMILAR FURNITURE							
I hereby certify that the following correspondence: Transmittal of Payment of Issue Fee (1 pg.); Part B - Fee(s) Transmittal (1 pg. in duplicate); PTO-2038 Credit Card Payment Form in the amount of \$1,015.00; postcard.							
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CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on February 4, 2006 (Date)							
Matthew S. Bethards (Typed or Printed Name of Person Mailing Correspondence) (Signature of Person Mailing Correspondence)							
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